Health Information Technology Council August Update

August 4, 2014

Today's Agenda:

- Meeting Minutes approval [5 min]
- Customer Use Case: Winchester & eLINC [45 min] Eddy Rospide
- HIway Implementation & Support Update [20 min] Darrel Harmer
 - Legal Agreement Update
 - HIway Release Schedule Update
 - Communications and Outreach Update
 - HIway Operations Update
 - HISP-HISP Update
 - Phase 2 Pilot Update
- MeHI Update [15 min]
- Wrap up [5 min]

Discussion Item 2: Winchester & eLINC

Eddy Rospide EMR/HIE Director Winchester Highland Management, LLC

eLINC Health Information Exchange (HIE)

 Our eLINC HIE was formed by Winchester Hospital and the IPA under Highland Management. More info can be found at http://www.elinc.biz.

eLINC stands for:

- electronically Leveraging information
- Improving care
- Networking providers, and
- Communicating with each other
- eLINC is a vehicle for our stakeholders to message each other, and share or exchange health information in a safe, secure, and non-competitive manner

Winchester Community - Current Environment

- Community of close to 400 physicians and Winchester Hospital
 - 182 out of 208 eligible providers have attested for MU Stage 1.
 - There are a total of 81 interfaces between Winchester Hospital and physician practices
- 23 Different EMRs but mainly 11 supported
 - eClinicalWorks, AthenaHealth, Allscripts
 Professional, NexTech, GE Centricity,
 Origin, Practice Partners, MDIntellesys,
 Vitera, NextGen, and Amazing Charts.
- 23 Practices or 27 physicians are still on paper.

eLINC Participant Services

- The same folks that implemented the HM supported EMRs in the community also make up the eLINC implementation and support Team. They provider the following services:
 - EMR implementation
 - Meaningful Use Attestation assistance
 - Secure direct messaging accounts which can communicate with any EMR vendor who uses a <u>HISP that participates and</u> <u>implemented the direct trust framework and certificate</u> <u>bundles respectively.</u>
 - Hospital admission and discharge notifications for PCPs and ACOs
 - Clinicians access to patient clinical information (delivered directly in the EMR), aggregated from many organizations (eLINC HIE), for use at the point of care
- Central Data Repository (CDR) services for aggregation of patient data from HIE participant EMR systems (Deploying in June 2014)
 - Results delivery from Winchester Hospital laboratory, radiology, and other departments (Current)
 - Business Intelligence(BI) services for network and provider quality performance reporting (TBD)

eLINC Clinical Summary Repository

Picture: A picture of the vendor and trading partner logos connected to elinc was provided – eClinicalWorks, athenahealth, McKesson, Allscripts, Winchester Hospital, NexTech, GE Centricity, Origin, MDIntellesys, Greenway (Vitera).

Clinical Data Repository — eCW eEHX Features and Capabilities:

- Integrated directly with the EMR as an IHE compliant cross enterprise document repository
- Access may also be through secure web login
- Aggregates data from all contributing organizations
- Supports C32 CCD integration
- Non-structured documents can be uploaded only through eCW EMRs
- Patient consent flows directly from ADT integrated EMRs

Work in progress:

- Encrypted CCD download
- Patient consent capture by participant front staff in cases where no ADT interface with consent exists between participant EMR and the eLINC HIE
- Monitoring report on performance of live eCW
 EMRs when tightly integrated with eEHX
- Performance report on nightly sweep of patient data from eCW EMRs where patients have opted into the eLINC HIE
- Workflow concerns related to consent capture
- Proper education and training of participant organizations' staff and clinicians

Lessons Learned So Far

- We piloted on June 23rd, 2014 with two eCW practices then piloting with one Athena Practice
 - We've evaluated the two pilots and made some changes to our implementation process for the eCW practices.
 - Cyber Liability Insurance binding required for HIE engagement
 - Roughly 95% of patients are choosing to opt into eLINC
 - Patient consent must be captured during non-emergent visits
 - Front Desk or registration workflow will change
 - Clinical workflows will change
 - Practice physician champions are good to have at every rollout
- Our goal is for providers to go to one place to see their patient's ehealth summary
 - Mainly, their EMR (Mostly in their EMRs)
 - Lastly, the eLINC Clinical Summary Web view
- Go to http://www.elinc.biz to learn about eLINC.

What's A CCD? What's In It?

- Patient Demographics
- Referring or transitioning provider's name and office contact information
- Procedures
- Encounter diagnosis
- Immunizations
- Laboratory test results
- Vital signs (height, weight, blood pressure, BMI)
- Smoking status
- Functional status, including activities of daily living, cognitive and disability status
- Demographic information
- Discharge instructions
- Discharge summary
- Current problem list
- Current medication list
- Current medication allergy list
- Problem lists At a minimum a list of current, active & historical diagnoses
- Allergy
- Care Plan, goals and instructions
- Care team including the primary care provider of record and any additional known care team members beyond the referring or transitioning provider and the receiving provider
- Radiology and other departmental reports
- Advanced directives

eLINC eHealth Summary,

Picture: A screenshot of the eLINC eHealth Summary was provided using test patient data.

eLINC eHealth Summary, Con't

Picture: A screenshot showing additional data included in the eLINC eHealth Summary was provided.

eLINC High Level End State Diagram

Picture: A high level diagram showing the workflow between systems (Winchester, the HIway and IPA Practice EMR's) was displayed.

eLINC & Mass Hiway

- First HISP-HISP connectivity between MA HIway and eLINC
 - Use cases supported
 - Excel orthopedics (eLINC participant) to
 Winchester Hospital Homecare (MA Hlway participant) and surgical pre-admission and testing (PAT)
 - Salter Healthcare (eLINC Participant) patient record (PDF) to Winchester HIM department
 - Winchester Hospital discharge summary care record to Salter Healthcare
- Next Step
 - Winchester Hospital Phase 2 integration with MA HIway patient locator service
 - Deployment of MA HIway accounts to other departments at Winchester Hospital to support other projects
 - Referring EMR vendors to work with MA HIway to support the MIIS requirements for integration

Questions

Discussion Item 3: Mass HIway Update

- Legal Agreement Update
- HIway Release Schedule Update
- Communications and Outreach Update
- HIway Operations Update
- HISP-HISP Update
- Phase 2 Pilot Update

HIway Legal Agreements

Update on Mass HIway Legal Agreements: Policies and Procedures version 2 – final draft

- Drafted new policies for Query & Retrieve (phase 2 services) in consultation with Advisory Groups
- Re-organized the Policies & Procedures to be a "go to" reference document for all Mass HIway policies
- Note: P&Ps will continue to be a "living" document as the Mass HIway grows and evolves

Streamlined agreements

- Simplified multiple legal agreements by moving overlapping content out of the agreements and into a common set P&Ps
- New streamlined agreements are underway
 - Advisory Group review in Q3
 - Implementation in Q4

HIway Release Schedule

Activity	Target date
Opioid Treatment Program Node Go-Live	Complete
Cancer Registry Node Go-Live	Complete
Webmail Upgrade Go-Live (CCDA Editor, shared folders to support SEE application)	Complete
Meditech XDR Solution Go-Live (enables providers to send/receive Direct messages from their Meditech EHR)	Complete
HISP to HISP Solution Go-Live (see detailed slide by vendor)	Complete
Healthcare Provider Portal R1 (Provider Directory Bulk Load & Cert Mgmt.)	J une 2014 July 2014
Healthcare Provider Portal R2 (Enrollment self-service & PD and cert mgmt. enhancements)	October 2014
eReferral Phase 1 Node Go-Live (enables bi-directional communication on health related targets given from HPOs to CBOs such as YMCA, Tobacco quit lines, etc.) Release 1 (SFTP) Release 2 (HIway integration)	Complete August 2014
Childhood Lead Paint Poison Prevention Program Node Go-Live	September 2014
Relationship Listing Service Release 2 (Web service access, eMPI tuning, Provider Notifications, etc.)	September 2014

HIway Outreach Update

- Increase transactions
- Find success stories
- Strategic customer acquisition (trading partners)
- Align tracking metrics with Mass HIway impact / community footprint
- Improve customer relations / build community trust
- Understand & address the issues / barriers
- Develop educational material & resources, user groups, seminars /webinars
- Regular dissemination of reliable information (newsletter, website)
- Strategic planning underway
- Customer assessment survey in circulation
- Leadership meeting August 7th to review / finalize activities
- New masshiway.net to launch September 1

6 New Participation Agreements completed in June:

- David E. Adelberg MD
- Jeremy B. Stern MD
- Lighthouse Nursing
- Noble VNA (Visiting Nurse and Hospice Services)
- Tri-County Medical Associates
- Wing Memorial

10 New Participation Agreements completed in July:

- Adam A. Paszkowski MD
- Bright Star Health
- Carewell Dental PC
- Charlton Optical
- William Dunn MD
- Hugh M. Cooper MD
- John Howland MD
- John Kalinowski DDS
- Lisa M. Kralian OD
- Robert Lebow MD

Current Total = 220* Mass HIway Organizations

*Total adjusted due to mergers and acquisitions (net reduction of 1 organization)

4 New Organizations Went Live in June:

- Mount Auburn Hospital
- Noble VNA (Visiting Nurse and Hospice Services)
- Sturdy Memorial Hospital
- Tri-County Medical Associates

5 New Organizations Went Live in July:

- Adcare Hospital
- Brigham and Women's Faulkner Hospital
- John M. Tumolo MD
- Norwell VNA (Visiting Nurse and Hospice Services)
- Wing Memorial Hospital

Current Total = 168 Mass HIway Connections

- 226,913 Transactions exchanged during July
- . 3,011,515 Total Transactions (inception to date)

Picture: A bar graph of HIway transaction volume by month was displayed.

Mass Hiway Connection Forecast

Goal: Connect over **135** organizations to the HIway by June 30, 2014

HISP to HISP Connectivity

Picture: A list of vendors and their connection progress was displayed

* After working with vendors and their participants some of the target dates have been re-aligned in order to meet requirements on the vendor and participant side for exchanging messages and utilizing the Mass Hlway. The Hlway after bringing on several participants is in a position to bring additional HISPs live based on their timeframes and integration patterns. We continue to work with participants as they are ready to connect to the Hlway, and assist with any implementation specific requirements.

HISP to HISP Connectivity: Status of Surescripts & eCW

- SureScripts
 - UMass dbMotion development in progress; additional testing next week.
 - SureScripts (per policy) is unable to use same cert for both prod and non-prod
 - Orion is working on obtaining a new cert for non-prod environments

eCW

- Currently eCW requires XDS metadata element FormatCode
 - Optional in the minimal metadata specification;
 should be passed if received from the participant
- Currently eCW is unable to to relax this requirement
- Work-arounds identified so far:
 - Modify LAND workflow to require participants pass the FormatCode field.
 - Wait for future development to remove XDM bundles.
- We will escalate to eCW senior management
- HIway position
 - Continued flexibility to support participants connecting to the HIway as long as we're not expected to:
 - · go outside the Direct protocol or
 - open/inspect message payloads

Adjusting HIway technical spec to meet market needs

- The HIway is based on the Direct standard for secure transport a standard motivated by ONC and required for all federally certified EHR systems
- As with many standards, there is some looseness in the specification that can get resolved only through market conventions that emerge from implementation experience
- HIway is refining two such technical issues based on market feedback to ensure that we are as aligned as possible with industry conventions
 - Packaging of XDR content attached to a secure email message
 - When converting an XDR message to SMTP/SMIME, Direct standard suggests attaching the XDR message as a zip file (XDM)
 - HIway was designed to do this, but EHR vendors are not implementing this way due to workflow hassle of having to open a separate zip file for each transaction
 - HIway will change Direct gateway to attach XDR messages as simple attachments to enhance EHR integration and provider adoption
 - Only affects users who need XDR>SMTP translation (mostly webmail users)
 - Encryption of XDR payload
 - HIway was originally designed to encrypt each XDR message individually
 - EHR vendors are not implementing this way and are instead relying on transport-layer encryption (securing the whole pipe rather than each message in the pipe)
 - HIway has already adopted this approach for some vendors for public health messages, and will now expand it for all vendors using XDR integration
 - Only affects users who are connecting directly to HIway (i.e., without LAND device)

Phase 2 Pilot Update

- The 4 Query & Retrieve pilot organizations met on July 8 to share progress, documents (e.g., Consent forms), and lessons learned
- Anticipated first uses of Q&R services are to support Bi-directional exchange for Cardiology Admissions and support of Magic Button functionality
- All pilots have been able to implement consent It is taking ~3 months
 - Each site has worked with its vendors to configure consent flag capture
 - Sites have been able to update consent workflow processes and forms but caution that this is time consuming taking ~3 months per pilot
- Pilots requested more documentation to speed implementation including
 Implementation Guides, Security Specifications/Assurance, and training content
- All sites are on track to begin sending patient-consented demographics to the Relationship Listing Service in late summer/early Fall
 - BID Targeting late August
 - Tufts Targeting early September
 - Holyoke Targeting September
 - Atrius Targeting September/October

Discussion Item 4: MeHI Update

- HIway Implementation Grant update
- HIway Interface [Vendor] Grant update
- MeHI's Ongoing Support to the HIway

HIway Implementation Grants | Progress

Grantee organizations will continue to be supported by HIway Ops
 – and MeHI as needed

Picture: A graph of the grantees and their progress towards the five milestones was displayed. All but one grantee is committed to continue progress toward fully transacting via the HIway.

HIway Interface Grants | Progress

- HISP-HISP solution made available in May, though still being matured
- HIway Directory remains difficult to use

Picture: A graph of the vendors and their progress towards the five milestones was displayed.

MeHI's Ongoing Support to the HIway

MeHI's role post-ONC grant - Adoption and Impact

HIE efforts going forward for MeHI

Adoption- HIE Learning Series, Use Case Library and Development Form, Mass HIway Status Map, Connected Communities, &eHealth eQuality Programs,

Support – Continued support to the HIway team **Impact-** HIway Publication, HIE stories

Adoption | HIE Learning Series

Picture: A list of upcoming events was provided. (See notes for list)

Adoption | Use Case Library

- Work in progress
- Intended to accelerate connections by sharing use case details
- Current Library Categories
 - Transitions of Care
 - Lab Data Exchange
 - Public Health Reporting
 - More to come

Adoption | Use Case Development Form

Key questions:

- 1. Why are you connecting to the HIway?
- 2. What is the scenario?
- 3. Who is your trading partner(s)?
- 4. What systems/data sources are involved?
- 5. What data is being exchanged?
- 6. Are you sending or receiving or both?
 - If sending, can you create the data set?
 - If receiving, can you "digest" the data set?

Adoption | HIE Stories

Picture: A screenshot of the MeHI website's HIE Stories page was displayed.

Adoption | HIway Status Map

Picture: A map of Massachusetts HIway members- color coded by status

Impact | Connected Communities

- 1. Get data digital
- 2. Get data moving
- 3. Impact healthcare

Picture: A Map of Massachusetts

Discussion Item 5: Wrap Up

HIT Council meeting schedule

HIT Council 2014 Meeting Schedule*:

- January 13
- February 3
- March 10
- April 7
- May 5
- June 9
- July 7 (cancelled)
- August 4
- September 8
- October 6
- November 3
- December 8

*All meetings to be held from 3:30-5:00 pm at One Ashburton Place, 21st floor, Boston, unless otherwise noted